

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007191

FILED
Jul 07, 2004
Secretary of State**Entity Name:** CHILD AND FAMILY CONNECTIONS, INC.**Current Principal Place of Business:**600 SANDTREE DR
SUITE 109
PALM BEACH GARDENS, FL 33403**New Principal Place of Business:**3333 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406 US**Current Mailing Address:**600 SANDTREE DR
SUITE 109
PALM BEACH GARDENS, FL 33403**New Mailing Address:**3333 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406 US**FEI Number:** 65-0978467**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BARKER, ROBERT
600 SANDTREE DR
SUITE 109
PALM BEACH GARDENS, FL 33403 US**Name and Address of New Registered Agent:**BARKER, ROBERT
3333 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

07/07/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: DEMARK, DIANE
Address: 1485 S SAMORAN BLVD
City-St-Zip: WINTER PARK, FL 32792**Title:** P () Delete
Name: PATRICK, JAMES E
Address: 1485 S SEMORAN BLVD
City-St-Zip: WINTER PARK, FL 32792**Title:** D () Delete
Name: OLSHANSKY, HOWARD
Address: 2309 PONCE DE LEON AVE
City-St-Zip: WEST PALM BEACH, FL 33407**Title:** D () Delete
Name: LADIKA, MATTHEW
Address: 2309 PONCE DE LEON AVE
City-St-Zip: WEST PALM BEACH, FL 33407**Title:** D () Delete
Name: OWEN, SANDY
Address: 2309 PONCE DE LEON AVE
City-St-Zip: WEST PALM BEACH, FL 33407**Title:** D () Delete
Name: PASCO, JO-ANN
Address: 311 SOUTH 2ND STREET
City-St-Zip: FORT PIERCE, FL 34950**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S (X) Change () Addition
Name: BOCCABELLA, LOUIS
Address: 311 SOUTH 2ND STREET
City-St-Zip: FORT PIERCE, FL 34950**Title:** D (X) Change () Addition
Name: PELLIGRINO, LIZ
Address: 311 SOUTH 2ND STREET
City-St-Zip: FORT PIERCE, FL 34950**Title:** D (X) Change () Addition
Name: PRISCO, JO-ANN
Address: 311 SOUTH 2ND STREET
City-St-Zip: FORT PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE DEMARK

D

07/07/2004

Electronic Signature of Signing Officer or Director

Date